Ohio Real Estate Auctions, LLC BUYER BROKER REGISTRATION FORM

Print this form and fax to 614-635-2792 or email to hoffman247@gmail.com

Broker/Salesperson:		Agency:	
Address:			
Phone:	Email:		
Real Estate License Number			
As a licensed real estate B.	roker/Salespe	rson, I wish to register the following cli	ient:
Name:	-	,	
Address:			
Phone:			
for the upcom	ing auction of	the following subject property:	
5439 Craw	ford Drive	e, Columbus, OH 43229	
I understand and acknowledge:		_	
1) That my compensation will be based on 2% close on the transaction.	of my client's hig	th bid amount should my client be the successfu	al bidder, pay for and
2) That I am required to either conduct a showing (NOT including the one on auction day) whichever		operty for my client or accompany them to a scheo	duled open inspection
3) I must accompany my client to the auction unit	less bidding onlin	ne.	
4) If bidding online, I must register my client pri	or to their registe	ring online.	
5) Registration must take place a minimum of 48	hours prior to th	ne scheduled auction time (no exceptions).	
6) No oral registrations will be accepted.			
I am representing my client as Buyer, and not the Auctions LLC, and the Seller from any and all any actions or inactions or representations made A prospective bidder that has previously been it property will not be eligible as a client for any B	claims, costs or ending by me or in conninct with C	xpenses, including reasonable attorney's fee, whection with the sale of this property. This Real Estate Auctions LLC or the Seller controls.	hich may arise out of
THERE WILL BE NO EX	CEPTIONS T	TO THESE BROKER REQUIREME	NTS.
In addition to my signature below, please understand and acknowledge acceptance	•	ature of my client, indicating that they ha	ave read,
Broker or Salesperson Signature	Date	Client or Buyer Signature	Date
Authorized Auctioneer Acknowledgmen	nt Date	OhioRealEstateAuctions	